

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		12/09/94
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	12/16/99
FORMALITY REVIEW	<i>[Signature]</i>	71423	1-4-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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